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FEC FORM 1

STATEMENT OF ORGANIZATION

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2015 MAY 19 AM 11: 48

			<u> </u>	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	5
Alina Valdes for Congress				
	<u> </u>	<u></u>		
ADDRESS (number and street)	P.O. Box 8232	297 		
(Check if address is changed)	Pembroke Pin	les	FL	33082 3297
	,	CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)				
alinavaldesforcongress@gmail.com				
(Check if address is changed)			1. 1.4 1. 1	
COMMITTEE'S WEB PAGE ADDRESS (URL)				
(Check if address is changed)	nttp.//amiavan	desidicongless.	COIII	
2. DATE 05 (2015)				
3. FEC IDENTIFICATION NUMBER				
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.				
Type or Print Name of Treasurer Alina Valdes				
Type of Print Name of Heastrei				
Signature of Treasurer Date 05" 12° (2015)				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office		For further information c		
Use		Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)